

DEPARTMENT OF HOMELAND SECURITY

U.S. Coast Guard

**ENLISTED SUPPLEMENTARY CLOTHING ALLOWANCE WORKSHEET**

Purpose: For eligible enlisted personnel to request the Supplementary Clothing Allowance.

Reference: CG Pay Manual, COMDTINST M7220.29(series), Par. 3-J-6

1. EMPLID	2. Rate/Rank/ Name ( <i>last, first, MI</i> )	3. Current Permanent Duty Station
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**NOTES:** The allowance is payable only once during an assignment to such duty. The allowance is not payable upon reassignment to the same type of duty during a period of continuous active duty, unless 3 years or more have elapsed between such assignments. Please see Paragraph 3-J-6 of the Coast Guard Pay Manual or <http://www.uscg.mil/ppc/mas/suppcma.asp> for more guidance.

**4. A Supplementary Clothing Allowance is requested for the:**

Check only one

The Coast Guard Academy Band

The Ceremonial Honor Guard at TISCOM Alexandria, VA

The Ceremonial Section at CG TRACEN Cape May, NJ

Duty as a Coast Guard Recruiter or at a U.S. Military Entrance Processing Command (USMEPCOM)

Ship Training Detachment, Area Training Team, Section or District Training Team, Subsistence Advisory Team, Regional Inspector

Duty as Recruit Company Commander, Assistant Company Commander or Recruit Drill Instructor and meets eligibility requirements

Coast Guard command police department where enlisted members are required to alter their CG uniform (*sew on command patches, badges, etc.*)

Duty aboard a Coast Guard Buoy Tender (*CO/OIC must authorize*)

Active Duty or Selected Reserve Members (SELRES), requiring the wearing of the maternity uniform

Gold Badge Command Master Chief (CMC)

Duty as Master Chief Petty Officer of the Coast Guard

5. The effective date of this assignment/qualification is: \_\_\_\_\_ (*enter date*).

**Privacy Act Statement**

In accordance with 5 USC Section 522a(e)(3), the following information is provided to you when supplying personal information to the U.S. Coast Guard – 37 USC Section 418, **Principal Purpose(s)** – Used to request a supplementary clothing allowance. **Routine Uses** – Same. **Disclosure** – Disclosure of this information if voluntary, but without disclosure the member's request may not be approved.

6. Member's Signature	Date
7. Command Signature	Date
8. SPO Data Entry Technician Signature ( <i>Transaction Entered</i> )	Date
9. SPO Auditor Signature ( <i>Transaction Approved</i> )	Date
10. SPO Data Entry Technician Signature ( <i>Transaction Verified</i> ) Entitlement Receipt Verified on Leave and Earnings Statement for _____ (Month), _____ (Year) Completed worksheet filed in Section 3 of the SPO PDR	Date